FCC For	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	512295	
<015>	Study Area Name	SILVER STAR TEL-WY	
<020>	Program Year	2017	
<030>	Contact Name: Person USAC should contact with questions about this data	Michelle Motzkus	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	3078836690 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	mammotzkus@silverstar.net	
	Form Type	54.313 and 54.422	

(100) S	(100) Service Quality Improvement Reporting FCC Form 481						
	ollection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013				
<010> <015> <020> <030> <035> <039>	Study Area Code Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	512295 SILVER STAR TEL-WY 2017 Michelle Motzkus 3078836690 ext. mammotzkus@silvers	3				
<110>	Has your company received its ETC certification from the FCC?	(yes / no)					
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no)					
<112>	If your answer to Line <111> is yes, please file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your CETC which only receives frozen support, your progress report is only required to address voice telephony service.		2295wy112.pdf				
	Please select the appropriate responses below (Yes, No, Not Applicable) to cont that the attached document(s), on line 112, contains a progress report on its fiv service quality improvement plan pursuant to §54.202(a). The information shall submitted at the wire center level or census block as appropriate.	e-year	Name of Attached Document				
<113> <114> <115> <116> <117> <118>	Maps detailing progress towards meeting plan targets Report how much universal service (USF) support was received How much (USF) was used to improve service quality and how support was used to improve much (USF) was used to improve service coverage and how support was used to improve much (USF) was used to improve service capacity and how support was used to improved an explanation of network improvement targets not met in the prior calendar year.	prove service coverage	Yes Yes Yes Yes Yes Yes Not Applicable				

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

ata Coll	ection Form									1B Control No. 3060 v 2013	-0986/OMB Control N	o. 3060-0819
<010>	Study Area Co	Study Area Code 512295										
<015>	Study Area Na	ame				SILVER STAR	TEL-WY					
:020>	Program Year	•				2017						
:030>	Contact Name	e - Person USA(Should contac	t regarding this	data	Michelle Mo	tzkus					
:035>	Contact Telep	hone Number	- Number of pe	rson identified	in data line <0	30> 3078836690	ext.					
:039>	Contact Email	Address - Ema	il Address of pe	erson identified	in data line <0	30> mammotzkus@	silverstar.net					
<210>	For the prior	r calendar ve	ar, were there	any reportal	ole voice serv	ice outages?	No					
<220>	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d>></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference	Outage Start	Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage	Did This Outage Affect Multiple		
	Number	Date	Time	Date	Time	Customers Affected	Total Number of Customers	Affected (Yes / No)	Description (Check all that apply)	Study Areas (Yes / No)	Service Outage Resolution	Preventati Procedure
							customers	(Tes / No)	ан спас арргу)	(Tes / NO)	Resolution	Flocedule

•	fulfilled Service Request lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	512295	
<015>	Study Area Name	SILVER STAR TEL-WY	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3078836690 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	mammotzkus@silverstar.net	
<300> U	Infulfilled service request (voice)	0	
<310>[Detail on attempts (voice)		
<320>	Unfulfilled service request (broadband)	e of Attached Document 0	
<330>	Detail on attempts (broadband)N	lame of Attached Document	

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code 512295
<015>	Study Area Name SILVER STAR TEL-WY
<020>	Program Year 2017
<030>	Contact Name - Person USAC should contact regarding this data Michelle Motzkus
<035>	Contact Telephone Number - Number of person identified in data line <030>
<039>	Contact Email Address - Email Address of person identified in data line mammotzkus@silverstar.net <030>
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<410>	Complaints per 1000 customers for fixed voice 0.0
<420>	Complaints per 1000 customers for mobile voice
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<440>	Complaints per 1000 customers for fixed broadband 0.0
<450>	Complaints per 1000 customers for mobile broadband

•	npliance With Service Quality Standards and Consumer Protection Rules lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013			
<010>	Study Area Code	512295				
<015>	Study Area Name	SILVER STAR TEL-WY				
<020>	Program Year	2017				
<030>	Contact Name - Person USAC should contact regarding this data Michelle Motzkus					
<035>	Contact Telephone Number - Number of person identified in data line <030> 3078836690 ext.					
<039>	Contact Email Address - Email Address of person identified in data line <030> mammotzkus@silverstar.net					
<500>	00> Certify compliance with applicable service quality standards and consumer protection rules Yes					
<510>	512295wy510.pdf 510> Descriptive document for Service Quality Standards & Consumer Protection Rules Compliance					

(600) F	unctionality in Emergency Situations		FCC Form 481		
Data C	ollection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013		
<010>	Study Area Code	512295			
<015>	Study Area Name	SILVER STAR TEL-WY			
<020>	Program Year	2017			
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus			
<035>	Contact Telephone Number - Number of person identified in data line <030>	3078836690 ext.			
<039>	Contact Email Address - Email Address of person identified in data line <030>	mammotzkus@silverstar.net			
<600>	Certify compliance regarding ability to function in emergency situations	Yes			
<610>	Descriptive document for Functionality in Emergency Situations	512295wy610.pdf			

(700) Price Offerings including Voice Rate Data		FCC Form 481
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	512295	
<015> Study Area Name	SILVER STAR TEL-WY	
<020> Program Year	2017	
<030> Contact Name - Person USAC should contact regarding this data	Michelle Motzkus	
<035> Contact Telephone Number - Number of person identified in data	ine <030> 3078836690 ext.	
<039> Contact Email Address - Email Address of person identified in data	line <030> mammotzkus@silverstar.net	
<701> Residential Local Service Charge Effective Date 1/1/2016 <702> Single State-wide Residential Local Service Charge		

3>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
	. .	- 1 ()	0.0 (0.00)		Residential Local			Mandatory Extended Area	
-	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fe
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-									
-									
-					_				
-					See at	tached worksheet			
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-									
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(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code 5	12295
<015>	Study Area Name	SILVER STAR TEL-WY
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus
<035>	Contact Telephone Number - Number of person identified in data line <030>	3078836690 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mammotzkus@silverstar.net

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
						Broadband Service -			Usage Allowance
	C4-4-	F (11 F.C.)	Davidantial Data	State Regulated	T-4-1 D-4 4 F	Download Speed	Broadband Service -	Usage Allowance	Action Taken When
	State	Exchange (ILEC)	Residential Rate	Fees	Total Rate and Fees	(Mbps)	Upload Speed (Mbps)	(GB)	Limit Reached {select }
				0	. 1				
				- See attacl	nea				
			,	worksheet -	•				

. , .	erating Companies ection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		512295	
<015>	Study Area Name	·	SILVER STAR TEL-WY	
<020>	Program Year		2017	
<030>	Contact Name - Person l	JSAC should contact regarding this data	Michelle Motzkus	
<035>	Contact Telephone Num	ber - Number of person identified in data line <030>	3078836690 ext.	
<039>	Contact Email Address -	Email Address of person identified in data line <030>	mammotzkus@silverstar.net	
<810>	Reporting Carrier	Silver Star Tel - WY		
<811>	Holding Company	Horizon Communications, Inc.		
<812>	Operating Company	Silver Star Telephone Company, Inc.		

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
-			
=			
-	See atta	ched workshe	et
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-			
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-			
-			
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-			

	ibal Lands Reporting Ilection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	512295
<010>	Study Area Code Study Area Name	SILVER STAR TEL-WY
<020>	•	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus
<035>		3078836690 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mammotzkus@silverstar.net
<900>	Does the filing entity offer tribal land services? (Y/N)	No
<910>	Tribal Land(s) on which ETC Serves	
<920>	Tribal Government Engagement Obligation	Name of Attached Document
If your o	company serves Tribal lands, please select (Yes,No, NA) for each these boxes	
-	irm the status described on the attached document(s), on line 920,	
	strates coordination with the Tribal government pursuant to	Select
§ 54.31	3(a)(9) includes:	Yes or No or
<921> <922>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning;	Not Applicable
<923>	Marketing services in a culturally sensitive manner;	
<924>	Compliance with Rights of way processes	
<925>	Compliance with Land Use permitting requirements	
<926>	Compliance with Facilities Siting rules	
<927>	Compliance with Environmental Review processes	
<928>	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	

		rage 1.
(1000) V	pice and Broadband Service Rate Comparability	FCC Form 481
Data Coll	ection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2013
<010>	Study Area Code	512295
<015>	Study Area Name	SILVER STAR TEL-WY
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus
<035>	Contact Telephone Number - Number of person identified in data line <0.	
<039>	Contact Email Address - Email Address of person identified in data line <0	030> mammotzkus@silverstar.net
<1000>	Voice services rate comparability certification	Yes
<1010>	Attach detailed description for voice services rate comparability compliance	Name of Attached Document
		Name of Attached Document
<1020>	Broadband comparability certification	Yes - Pricing is no more than the most recent applicable benchmark announced by the Wireline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance	Name of Attached Document
		Name of Attaclica Document

	o Terrestrial Backhaul Reporting lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> <015> <020> <030> <035> <039>	Study Area Code Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	512295 SILVER STAR TEL-WY 2017 Michelle Motzkus 3078836690 ext. mammotzkus@silverstar.net	
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps	

(1200) Te	erms and Condition for Lifeline Customers			FCC Form 481
Lifeline				OMB Control No. 3060-0986/OMB Control No. 3060-0819
	ection Form			July 2013
<010>	Study Area Code		512295	
<015>	Study Area Name		SILVER STAR TEL-WY	
<020>	Program Year		2017	
<030>	Contact Name - Person USAC should contact regarding this data		Michelle Motzkus	
<035>	Contact Telephone Number - Number of person identified in data line	<030>	3078836690 ext.	
<039>	Contact Email Address - Email Address of person identified in data line	<030>	mammotzkus@silverstar.net	
		_	512295wy1210.pdf	
			512295Wy1210.pdf	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans			
				Name of Attached Document
4000				
<1220>	Link to Public Website	TTP		
"Dlagge of	neck these boxes below to confirm that the attached document(s), on line 1210	0		
	• •	υ,		
	bsite listed, on line 1220, contains the required information pursuant to			
	(a)(2) annual reporting for ETCs receiving low-income support, carriers must			
annually i	eport:			
<1221>	Information describing the terms and conditions of any voice	~		
\1221>	telephony service plans offered to Lifeline subscribers,	<u> </u>		
	,			
.4222		~		
<1222>	Details on the number of minutes provided as part of the plan,	<u> </u>		
<1223>	Additional charges for toll calls, and rates for each such plan.	V		
	- · · · · · · · · · · · · · · · · · · ·			

(2000) Pi	2000) Price Cap Carrier Additional Documentation FCC Form 481			
Data Col	lection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819	
Including	Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		July 2013	
<010>	Study Area Code	512295		
<015>	Study Area Name	SILVER STAR TEL-WY		
<020>	Program Year	2017		
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus		
<035>	Contact Telephone Number - Number of person identified in data line <030>	3078836690 ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	mammotzkus@silverstar.net		
Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54 313(b) (c) (d) (e). The information reported on this form and in the documents attached below is accurate				

Incremental Connect America Phase I reporting <2010> 2nd Year Certification 47 CFR § 54.313(b)(1)(i) - Note that for the July 1 2016 certification, this applies to Round 2 recipients of Incremental Support <2011> 3rd Year Certification 47 CFR § 54.313(b)(1)(ii) - Note that for the July 1 2016 certification, this applies to Round 1 recipients of Incremental Support <2022> Recipient certifies, representing year two after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only. The attachment on line 2024 includes a statement of the total amount of <2023> capital funding expended in the previous year in meeting Connect America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year two -54.313(b)(2)(ii). Round 2 recipients only. <2024A> Round 2 Recipient of Incremental Support? Attach list of census blocks indicating where funding was spent in year Name of Attached Document Listing <2024B> two - 54.313(b)(2)(ii). Round 2 recipients only. **Required Information** <2025A> Round 1 or Round 2 Recipient of Incremental Support? <2025B> Attach geocoded Information for Phase I milestone reports (Round 1 for Name of Attached Document Listing year three and Round 2 for year two) - Connect America Fund, WC **Required Information** Docket 10-90, Report and Order, FCC 13-<2015> 2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)

Pata Collection For	rrier Additional Documentation (Continued) m eturn Carriers affiliated with Price Cap Local Exchange Carriers	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<2016>	Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)} Certification support used to build broadband : America Phase II Reporting {47 CFR § 54.313(e)}	
	Connect America Fund Phase II recipient?	
<2017B>	Attach information for Phase II - 54.313(e)(1) - list of geocoded locations already meeting the 54.309 public interest obligations at the end of calendar year 2015 and total amount of Phase II support, if any, the price	Name of Attached Document Listing Required Information
<2018>	cap carrier used for capital expenditures in 2015. Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(2)(ii)	Name of Attached Document Listing Required Information
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(2)(v)	
<2020>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 40% of its supported locations in the state on December 31, 2017 - 54.313(e)(3)	
<2021>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 60% of its supported locations in the state on December 31, 2018 - 54.313(e)(4)	
<2026>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 80% of its supported locations in the state on December 31, 2019 - 54.313(e)(5)	
<2027>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 100% of its supported locations in the state on December 31, 2020 - 54.313(e)(6)	

(3005) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	512295
<015>	Study Area Name	SILVER STAR TEL-WY
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus
<035>	Contact Telephone Number - Number of person identified in data line <030>	3078836690 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mammotzkus@silverstar.net

Complete the items below to note compliance with five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

	Progress Report on 5 Year Plan		
(3009)	Carrier certifies to 54.313(f)(1)(iii)		
(3010A)	Milestone Certification {47 CFR § 54.313(f)(1)(i)}	Yes - Attach Certific	512295wy3010.pdf
(3010B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	No - No New Community Anchors	
(3012B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3013)	Is your company a Privately Held ROR Carrier $\{47\ CFR\ \S\ 54.313(f)(2)\}$	(Yes/No)	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information	
(3018)	If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:	(Yes/No)	
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	~	
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:	~	
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		
(3023)	Underlying information subjected to a review by an independent certified public accountant		
(3024)	Underlying information subjected to an officer certification.		
(3025)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows		
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	512295wy3026.pdf

(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	512295
<015>	Study Area Name	SILVER STAR TEL-WY
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus
<035>	Contact Telephone Number - Number of person identified in data line <030>	3078836690 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mammotzkus@silverstar.net

Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

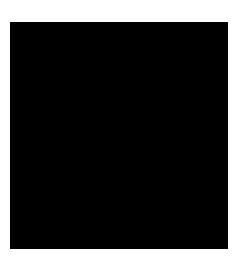
(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



CONFIDENTIAL INFORMATION –
SUBJECT TO PROTECTIVE ORDER
BEFORE THE FEDERAL
COMMUNICATIONS COMMISSION
and pursuant to 47 CFR § 0.459(a)

(4005) Rural Broadband Experiment Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
---	--

<010>	Study Area Code	512295
<015>	Study Area Name	SILVER STAR TEL-WY
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus
<035>	Contact Telephone Number - Number of person identified in data li	ne <030> 3078836690 ext.
<039>	Contact Email Address - Email Address of person identified in data li	ne <030> mammotzkus@silverstar.net

4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

Community Anchor Institutions – FCC 14-98 (paragraph 79)

speed and data usage allowances available in the

relevant geographic area.

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

must at least detail the pricing, offered broadband Name of Attached Document Listing Required Information

If yes to 4003A, please provide a response for 4003B.				
4003b . Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information			
Broadband Deployment Locations – FCC 14-98 (paragraph 80)				
4004a . Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.	Name of Attached Document Listing Required Information			
4004b . Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials				

Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	512295
<015>	Study Area Name	SILVER STAR TEL-WY
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus
<035>	Contact Telephone Number - Number of person identified in data line <030>	3078836690 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mammotzkus@silverstar.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients

l certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier: SILVER STAR TEL-WY

Signature of Authorized Officer: CERTIFIED ONLINE Date 06/27/2016

Printed name of Authorized Officer: Jefferson England

Title or position of Authorized Officer: CFO

Telephone number of Authorized Officer: 3078836675 ext.

Study Area Code of Reporting Carrier: 512295 Filing Due Date for this form: 07/01/2016

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Certification - Agent / Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	512295
<015>	Study Area Name	SILVER STAR TEL-WY
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus
<035>	Contact Telephone Number - Number of person identified in data line <030>	3078836690 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mammotzkus@silverstar.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier			
I certify that (Name of Agent) is authorized to submit the information reported on behalf of the reporting carrier. also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.			
Name of Authorized Agent:			
Name of Reporting Carrier:			
Signature of Authorized Officer:	Date:		
Printed name of Authorized Officer:			
Title or position of Authorized Officer:			
Telephone number of Authorized Officer:			
Study Area Code of Reporting Carrier:	Filing Due Date for this form:		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier			
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.			
Name of Reporting Carrier:			
Name of Authorized Agent Firm:			
Signature of Authorized Agent or Employee of Agent:		Date:	
Name of Authorized Agent Employee:			
Title or position of Authorized Agent or Employee of Age	nt		
Telephone number of Authorized Agent or Employee of	Agent:		
Study Area Code of Reporting Carrier:	Filing Due Date for this form:		
Persons willfully making false statements on this fo	rm can be punished by fine or forfeiture under the Communications A 18 of the United States Code, 18 U.S.C. § 1001.	ct of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title	

Attachments

CONFIDENTIAL INFORMATION -SUBJECT TO PROTECTIVE ORDER BEFORE THE FEDERAL **COMMUNICATIONS COMMISSION** and pursuant to 47 CFR § 0.459(a)

Silver Star Telephone Company, Inc.

dba Silver Star Communications ("Silver Star")

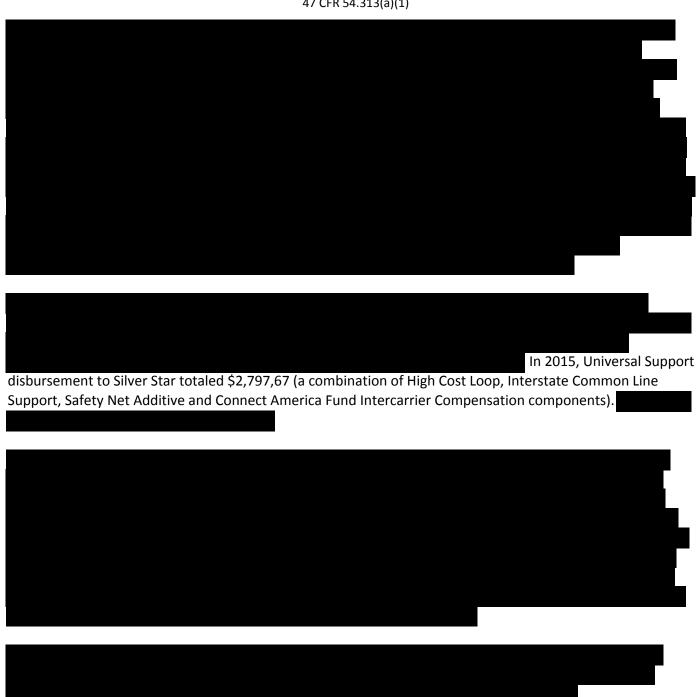
SAC 512295 - Wyoming

2016 Progress Report Five-Year Service Quality Improvement Plan (2015-2019)

Narrative Description

(FCC Form 481 - Line 112)

47 CFR 54.313(a)(1)



CONFIDENTIAL INFORMATION –
SUBJECT TO PROTECTIVE ORDER
BEFORE THE FEDERAL
COMMUNICATIONS COMMISSION
and pursuant to 47 CFR § 0.459(a)

2016 Progress Report on 5-Year Service Quality Improvement Plan Silver Star Telephone Company, Inc. dba Silver Star Communications

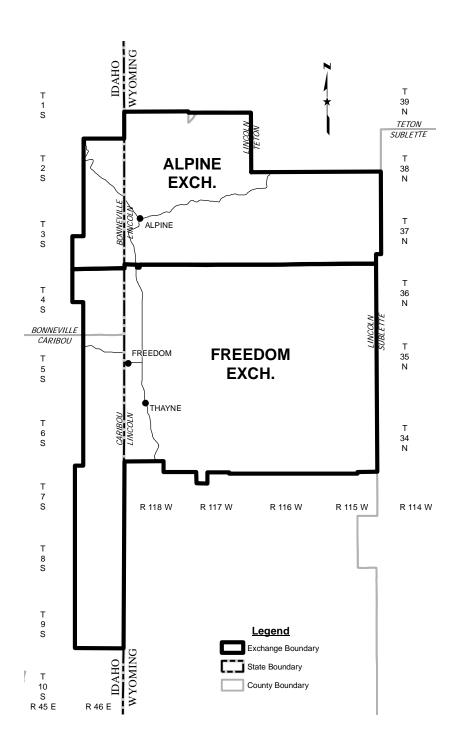
SAC 512295 - Wyoming

(FCC Form 481 – Line 112)

2015 Annual Capital Expenditures



Silver Star Telephone Company, Inc. Study Area Boundary SAC 512295



dba Silver Star Communications ("Silver Star")

SAC 512295 – Wyoming

Service Quality Standards & Consumer Protection Rules Statement of Compliance

(FCC Form 481 - Line 510)

Silver Star has established operating procedures designed to facilitate compliance with applicable consumer protection rules; including rules regarding verification of orders for telecommunications service as required of submitting carriers (i.e., Slamming) {Section 64.1100}, compliance with the FCC's Truth-in-Billing Requirements {64.2400}, compliance with the FCC's customer proprietary network information (CPNI) Requirements {64.2009}, and all other customer protection rules including employee training and policy manual development as applicable.

dba Silver Star Communications ("Silver Star")

SAC 512295 – Wyoming

Functionality in Emergency Situations Statement of Compliance

(FCC Form 481 - Line 610)

Silver Star has established operating procedures designed to facilitate compliance with applicable service quality standards, which may include customer remedies and improvement plans. Specifically Silver Star maintains its entire plant and system in such condition as to enable it to furnish safe and continuous service and conducts inspections of its system and facilities in such manner and with such frequency as may be necessary to obtain knowledge of their current condition and adequacy. Silver Star is capable of functioning in emergency situations and unforeseen events, by maintaining both battery and generator back-up power, which ensure reasonable functionality of voice and broadband services without an external power source. Additionally, voice and broadband traffic can be rerouted around damaged facilities, and Silver Star is capable of managing traffic spikes resulting from emergency situations.

Data Col	lection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	512295	
<015>	Study Area Name	SILVER STAR TEL-WY	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3078836690 ext.	

mammotzkus@silverstar.net

FCC Form 481

<701> Residential Local Service Charge Effective Date 1/1/2016
<702> Single State-wide Residential Local Service Charge

Contact Email Address - Email Address of person identified in data line <030>

<703>

<039>

(700) Price Offerings including Voice Rate Data

<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
				Residential Local			Mandatory Extended Area	
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
WY	Freedom/Alpine		FR	26.45	0.0	0.3174	4.11	30.88
WY	Freedom/Alpine		MS	12.0	0.0	0.144	4.11	16.25
				I				L

(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	512295
<015>	Study Area Name	SILVER STAR TEL-WY
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus
<035>	Contact Telephone Number - Number of person identified in data line <030>	3078836690 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mammotzkus@silverstar.net

711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c> <d1></d1></c>	<d2></d2>	· <d3></d3>		<d4></d4>
	State	Exchange (ILEC)	Residential	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service -Upload Speed (Mbps)	Usage Allowance	Usage Allowance Action Taken
			Rate					(GB)	When Limit Reached {select}
	WY	All Exchanges	39.99	0.0	39.99	10.0	3.0	999999.0	Other, No limit on usage
	WY	All Exchanges	44.99	0.0	44.99	20.0	5.0	999999.0	Other, No limit on usage
	WY	All Exchanges	44.99	0.0	44.99	30.0	7.5	999999.0	Other, No limit on usage
	WY	All Exchanges	54.99	0.0	54.99	30.0	7.5	999999.0	Other, No limit on usage
	WY	All Exchanges	54.99	0.0	54.99	30.0	10.0	999999.0	Other, No limit on usage
	WY	All Exchanges	54.99	0.0	54.99	50.0	10.0	999999.0	Other, No limit on usage
	WY	All Exchanges	69.99	0.0	69.99	50.0	20.0	999999.0	Other, No limit on usage
	WY	All Exchanges	74.99	0.0	74.99	50.0	10.0	999999.0	Other, No limit on usage
	WY	All Exchanges	74.99	0.0	74.99	100.0	20.0	999999.0	Other, No limit on usage
	WY	All Exchanges	94.99	0.0	94.99	100.0	40.0	999999.0	Other, No limit on usage
	WY	All Exchanges	104.99	0.0	104.99	200.0	50.0	999999.0	Other, No limit on usage
	WY	All Exchanges	109.99	0.0	109.99	100.0	20.0	999999.0	Other, No limit on usage
	WY	All Exchanges	154.99	0.0	154.99	200.0	100.0	999999.0	Other, No limit on usage
	WY	All Exchanges	259.99	0.0	259.99	300.0	50.0	999999.0	Other, No limit on usage
	WY	All Exchanges	299.99	0.0	299.99	1000.0	100.0	999999.0	Other, No limit on usage
							<u> </u>		

Data Coll	lection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		512295
<015>	Study Area Name		SILVER STAR TEL-WY
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<030>	Contact Name - Person U	SAC should contact regarding this data	Michelle Motzkus
<035>	Contact Telephone Numb	per - Number of person identified in data line <030>	3078836690 ext.
<039>	Contact Email Address - E	Email Address of person identified in data line <030>	mammotzkus@silverstar.net
<810>	Reporting Carrier	Silver Star Tel - WY	
<811>	Holding Company	Horizon Communications, Inc.	
<812>	Operating Company	Silver Star Telephone Company, Inc.	

FCC Form 481

(800) Operating Companies

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
_	Columbine Telephone Company, Inc.	472295	Silver Star Communications
	Gold Star Communications, LLC	479011	Silver Star Communications
	Gold Star Communications, LLC	519005	Silver Star Communications
_	Millennium Networks, LLC		Silver Star Communications
	Silver Star Telephone Company, Inc.	519001	Silver Star Communications
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			1

dba Silver Star Communications ("Silver Star")

SAC 512295 – Wyoming

Low-Income Telephone Assistance Program Terms & Conditions

Statement of Compliance

(FCC Form 481 - Line 1210)

Silver Star provides unlimited local calling for lifeline-eligible residential customers, discounted by the federally authorized amount of \$9.25. Silver Star's lifeline-discounted monthly telephone service provides access to emergency, operator, interexchange, and directory assistance services. The service does not include enhanced calling features such as voice mail, caller ID, call forwarding, internet or long distance telephone service. Toll Limitation service is provided at no charge for lifeline customers, upon customer request and pursuant to FCC guidelines.



dba Silver Star Communications ("Silver Star")

SAC 512295 – Wyoming

Milestone Certification
Statement of Compliance

(FCC Form 481 - Line 3010b)

Marlene H. Dortch, Secretary Office of the Secretary Federal Communications Commission 445 12th Street SW Washington, DC 20554

Dear Ms. Dortch:

In accordance with 47 CFR § 54.313(f)(1)(i), Silver Star Telephone Company, Inc. dba Silver Star Communications, SAC 512295, herby certifies that it is taking reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas and that requests for such service are met within a reasonable amount of time.

Sincerely,

Ron B. McCue

President and Chief Operating Officer

on B. Milue

Dated June 13, 2016

CONNECTING COMMUNITIES - CONNECTING LIVES

CONFIDENTIAL INFORMATION –
SUBJECT TO PROTECTIVE ORDER
BEFORE THE FEDERAL
COMMUNICATIONS COMMISSION
and pursuant to 47 CFR § 0.459(a)

SILVER STAR TELEPHONE COMPANY, INC.

dba Silver Star Communications ("Silver Star")

SAC 512295 – Wyoming

Annual Report of Company Financial Conditions and Operations Line 3026 (54.313(f)(2) Compliance)

(FCC Form 481)

This section, consisting of seven (7) pages, is redacted in its entirety.